PTO/SB/01 (10-01)

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DECLARATION FOR UTILITY OR

Attorney Docket Number

	DECLARATION FOR		First Named Invento	or MARC	M GROZ			
	PATENT APPLICATION		COMPLETE IF KNOWN					
		(37 CFR 1.63)						
	Declaration	Declaration	Filing Date					
	Submitted OR	Submitted after Initial Filing (surcharge	Art Unit					
	Filing	(27 CED 4 16 (a))						
	As the below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my name.							
	I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled: Method and System for Increasing Rate of Return and Maximum Payort in a Game with One or More Players (Title of the Invention)							
*								
7								
ffin Un								
17.31	the specification of which is attached hereto							
- No.								
my 4m	OR as United States Application Number or PCT International							
hato that had had to had								
Braze								
	Application Number	and was amende	ed on (MM/DD/YYYY)		(if applicable).			
	I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.							
	I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.							
	Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO			

[Page 1 of 2]

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Number or Bar Code Label OR Correspondence address below								
Name MARC M GROZ								
Address 244 Madison Avenue #377								
city New York	State	NΥ	zip 100/6					
Country United States !	Telephone (718) 25	3-7999	Fax (718) 377-3562					
thereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.								
NAME OF SOLE OR FIRST INVENTOR:								
Given Name (first and middle [if any]) MARC MICHAEL Family Name GROZ								
Inventor's MAQ	Date January 8,2002							
Residence: City New York	State V	Un, ted States Country	United States Citizenship					
Mailing Address 244 Madisun Avenue #377								
city New York	State NY	zip 100/6	Country USA					
NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor								
Given Name (first and middle [if any]) Family Name or Surname								
Inventor's Signature			Date					
Residence: City	State	Country	Citizenship					
Mailing Address								
City	State	ZIP	Country					
Additional inventors are being named on the	supplemental Additional Inve							